3/30/16

KENTUCKY LEGISLATIVE ETHICS COMMISSION

STATEMENT OF FINANCIAL DISCL To be filed by: All members of the General Assembly, all can General Assembly, and major management personnel in the	didates and nominees for ele	ction to the evernment.
☐ Check here and attach additional sheets if necessary	Number of sheets atta	ched.
Please Include The Following Information For	The Preceding Calend	dar Year:
Name Lendearns		The second secon
Business address_		
Business telephone		
Home address 2145, Eagle Creek	Dr. Lex Ky 40	515
Title of public position, or office sought	0, 79th J	
Other occupations of filer NA		
Occupations of spouse UK		
Positions held by filer in any business, partnership, cornot for profit from which the filer receives compensati partnership, or corporation Processing in the compensation of the compens	on, and the name of the to	ousiness,
Positions held by filer's spouse in any business, partner corporation not for profit from which the filer's spouse name of the business, partnership, or corporation	rship, corporation for properties receives compensation,	ofit, or and the
Names and addresses of all businesses, investments, or spouse, or filer's minor children had at any time during \$10,000 at fair market value, or 5% ownership interest	the reporting year an int	filer, filer's terest of

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ources and form of gross income of the filer's spouse (list	sources by name) <u>U [A</u>
ositions of a fiduciary nature in a business NA	
SALPA (ARTHUR) A COMMANDA	
A designation as commercial, residential, or rural, and the other than the filer's primary residence, in which there is an held by the filer, filer's spouse, or filer's minor children N	n interest of \$10,000 or more

he name of any legislative agent who is:	
1. A member of the filer's immediate family;	
2. A partner of the filer, or a partner of a mem	
3. An officer or director of the filer's employer	
4. An employer of the filer or an employer of a family;	a member of the filer's immediate
5. A business associate of the filer or a busines	ss associate of a member of the
filer's immediate family	
N/A	
Andrews Andre	
The names of any of the filer's clients who are legislat	
The number of any of the file selicins who are legislate	ive agents or employers NH

If yes, list the names of the clients partner made an appearance. The before a specific agency.	represented and list the filer need not identify	ne agencies before whi which client was repr	ch the esented
Clients			
Chicken	, 1985년 - 1985년 - 1985년 - 1985년 1987년 - 1985년 -		
			<u> </u>
State Agency			
	NOTICES		
 Upon receipt by the Commiss record available for copying. Any person who fails to file a a deficiency identified by the Corto exceed \$100 per day up to a m Any person who files a statem false information, or to omit required misdemeanor. 	statement of financial mmission in a timely naximum total fine of \$\frac{9}{2}\$	disclosure or who fail manner may be fined at \$1000. ests which they know to	s to remedy n amount not o contain
Send completed statements to:	The Kentucky Legis 22 Mill Creek Park Frankfort, Kentucky FAX (502) 573-292		ion
TO I	lug at (502) 572 2863		